



**Employee #**

**Overnight Stay** YES NO (CIRCLE ONE)

[illegible]

<b>GRAND TOTAL</b>	
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**AUTHORIZED SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Account Distribution if <b>NOT</b> Dept Key & Obj 6605 or 6610		
Key	Object	Amount
<b>Total</b>		

For Payroll Use
3440
3441
3442
3443

**NOTE: Attach required itemized receipts, hotel bills, conference registrations, etc**

**MEALS NOT INCLUDED IN CONFERENCE/SEMINAR FEES REIMBURSED AT PER DIEM GSA RATES.**

Rates found in IRS PUB. 1542 or at [www.gsa.gov/portal/category/21287](http://www.gsa.gov/portal/category/21287)